

#### STATE OF ARIZONA **COCONINO COUNTY** POLITICAL COMMITTEE **CAMPAIGN FINANCE REPORT**

FOR OFFICE USE ONLY RECEIVED

JUN 3.0 2014

1.	Yes for FUSD  Full Name of Committee PO Box 249	Goco	nino County Elections
2.	Address Flagstaff 86002 9288536458 City Zip Code Committee Phone #	3. ID#	
۷,	Sponsoring Organization (if applicable)		tion: August 26 2014 ion: November 4, 2014
	Name of Candidate and Office Sought (if applicable)  In foot yes for fust, com  Committee E-mail Address  Response of Candidate and Office Sought (if applicable)  Office Sought (if applicable)  Office Sought (if applicable)  Office Sought (if applicable)  Office Sought (if applicable)		Amended Report
4. I	Reporting Period (Please Check Appropriate Box)	Du	e Between
а	JANUARY 31ST REPORT - For Period of November 27, 2012 through December 31, 2013	Jan. 1 and	Jan. 31, 2014
b	JUNE 30TH REPORT - For Period of January 1, 2014 through May 31, 2014	June 1 and	June 30, 2014
С	PRE-PRIMARY ELECTION REPORT - For Period of June 1, 2014 through August 14, 2014	Aug. 15 and	l Aug. 22, 2014
ď	POST-PRIMARY ELECTION REPORT - For Period of August 15, 2014 through September 15, 2014	Sept. 16 and	Sept. 25, 2014
е	PRE-GENERAL ELECTION REPORT - For Period of September 16, 2014 through October 23, 2014	Oct. 24 and	l Oct. 31, 2014
f	POST-GENERAL ELECTION REPORT - For Period of October 24, 2014 through November 24, 2014	Nov. 25 an	d Dec. 4, 2014
5.	Summary	umn A	Column B

5.	Summary	Column A Total This Reporting Period	Column B Election Period Total to Date
5a	Total Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		4778,32
5b	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)	5060.22	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	3500.00	\$4500.00
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	8560,22	9278.32
6a	Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]		
6b	Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	144.30	862.40
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	8415.92	841,5,92

### DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

RECEIPTS AND DISBURSEMENTS		PAGE 2
1. Committee Name Yes for FUSD	2. ID#	PAGE 2
3. Report covering period of January 1, 2014 thru May 3120	214	
RECEIPTS	Column A This Period	Column B Campaign to Date
4. Contributions other than loans and in-kind:	Section 1	
(a) Individuals - more than \$50 (Total from Schedule A)	3500,00	4500,00
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)		
(c) Political Committees (Total from Schedule B)		
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	3500.00	4500.00
(e) Refund of contributions (Total from Schedule F-2)		
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]		
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		
(b) All other loans (Total from Schedule C-1)		
(c) Total Loans [add 5(a) and 5(b)]		
6. In-kind contributions (Total from Schedule E)		
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		
8. Total Receipts [add 4(f), 5(c), 6, and 7]	3500,00	4500,00
DICDUDCEMENTO		
DISBURSEMENTS	1.111 28	0:0:10
9. Expenditures for operating expenses (Total from Schedule D)	144,30	862,40
10. Independent Expenditures (Total from Schedule D-1)	, P , P , A , A , A , A , A , A , A , A	
11. Value of In-kind expenditures (Total from Schedule E)		
12. Loans made by reporting committee (Total from Schedule D-2)	//////////////////////////////////////	
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)		
(b) Repayment of all other loans (Total from Schedule D-5)		
(c) Total Loan Repayments [add 13(a) and 13(b)]		
14. Transfers to other political committees (Total from Schedule D-6)		
15. Any other disbursement (Total from Schedule D-7)	1,111 20	012 15
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	144.30	862,40
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		862,40
18. Total disbursements [subtract line 17 from line 16]	144-30	36670
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)		

20. I certify, under penalty of perjury, that I have examined the contents of this	s campaign finance report and to the best of my knowledge and belief it is true
and complete.	
Lydia Smith-Hemohill	
Type or Print Name of Treasurer	
Oxini Sullengull	June 30,2014
Signature of Treasurer or Candidate or Designating Individual	Date

revisèd 12/2013

#### CONTRIBUTIONS more than \$50 - from INDIVIDUALS\*

SCHEDULE A

	1. Committee Name Yes For FUSD		2. ID#	
	3. Report covering period from January 1, 2014 thru	May 3	1,2014	
4.	CONTRIBUTIONS  NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
а	Name Progressive Services Inc Street Address 23 North 35th Avenue City State Zip Phoenix AZ 85009 Occupation Employer	4-29-14	2500.60	2500.00
b	Street Address  5310 E. Northgate Loop SuiteA  City State Zip  Flagstaff AZ  Occupation Employer	4-29-14	1000.00	1000.00
C	Name  Street Address  City State Zip  Occupation Employer			
d	Name  Street Address  City State Zip  Occupation Employer	,		
ę	Name Street Address City State Zip Occupation Employer			
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A			3500.00

<sup>\*</sup>If contributions of \$50 or less are listed with contributors name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

# CONTRIBUTIONS of \$50 or less - AGGREGATE TOTAL\* 1. Committee Name Yes for FUSD 2. ID# 3. Report covering period from Yanuary 2014 thru May 31, 2014

#### 4. Aggregate Total of Contributions of \$50 or less

DESCRIPTION		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
,			
5. TOTAL THIS PERIOD [Transfer total to		6. CUMULATIVE TOTAL THIS	
Detailed Summary Page, Line 4(b) Column A]	0.00	CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column 13]	0.00

<sup>\*</sup>If contributions of \$50 or less are listed with contributors name and address on Schedule A, do not include them on this schedule. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

#### CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

1. Committee Name <u>Ye5</u>	tor FUSD		2. 10#
3. Report covering period from	January 1,2014	thru May	31,2014
	CONTRIBUTIONS	AMOUNT RECEIVED THIS	CUMULATIVE TOTAL THIS CAMPAIGN TO
1DENTIT	Y OF CONTRIBUTOR AND DATE RECEIVED	PERIOD	DATE
a ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
b ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
c ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
d ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
e ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
f ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
g ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED	-		
h ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
i ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
DATE RECEIVED			
ENTER TOTAL ONLY IF LAS total to Detailed Summary Pa	TPAGE OF SCHEDULE B [if last page of Schedule B, transfer ge, Line 4(c), Column A]	0,00	0.00

#### **EXPENDITURES FOR OPERATING EXPENSES\***

SCHEDULE D

1.	Committee Name Yes for FUSD	2. lD#	
3.	Report covering period from January 1 2014 thru	May 31,	2014
4.	EXPENDITURES  NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	Name Flagstaff Unified School District Street Address 3215 ESparrow City Flagstaff Description of Items or Services Purchased Facilities Trental Agreement Fee	4-8-14	97.50
	Street Address Street Address City Flagstaff Description of Jems or Services Purchased	4-8-14	46.80
	Name  Street Address  City  State  Zip  Description of Items or Services Purchased		
	Name Street Address City State Zip Description of Items or Services Purchased		
	Street Address  City State Zip  Description of Items or Services Purchased		
	Street Address  City State Zip  Description of Items or Services Purchased		
	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer Summary Page Line 9, Column A]	fotal to Detailed	144.30

#### INDEPENDENT EXPENDITURES\* **SCHEDULE D-1** 2. ID# 1. Committee Name 3. Report covering period from thru DATE AMOUNT INDEPENDENT EXPENDITURES OF THE **EXPENDITURE** MADE **EXPENDITURE** IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITED OR OPPOSED Name Street Address City State Zip Purpose and Description of Purchase Benefited Opposed Candidate Office Sought Year of Election Name Street Address City State Zip Purpose and Description of Purchase Benefited Opposed Candidate Office Sought Year of Election Name Street Address City State Zip Purpose and Description of Purchase Benefited Opposed Candidate Office Sought Year of Election 5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [if last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A] 0.00 \* SEE A.R.S. §16-901(14) I certify, under penalty of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the requestror suggestion of any candidate or any campaign committee or agent of that candidate.

NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST SIX MONTHS	AMOUNT
	0.00

Schedule D-1 Page of revised 12/2013

#### LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

1. Committee Name Yes for FUSD	2. ID#
3. Report covering period from Tanuani 1204 thru May 3). 2014	

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4.	LOANS MADE BY THE REPORTING COMMITTEE  NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE				DATE LOAN	AMOUNT OF
_		ID# OF COMMITTEE TO WHOM	LOAN (DISBURSE)		MADE	LOAN
	Committee Name			ID#		
	Address					
	City	State	Zip			
b	Committee Name			ID#		
	Address		4			
	City	State	Zip			
С	Committee Name	<u>, ! </u>	. <b>.</b>	ID#		
	Address	<del></del>				
	City	State	Zip			
d	Committee Name			ID#		
	Address					
	City	State	Zip			
е	Committee Name		hilli	ID#		
	Address		thin a second se			
	City	State	Zip			
f	Committee Name	***************************************	,,,,	ID#		
	Address					
	City	State	Zip			
	Committee Name			ID#		
	Address				California de la calenta de la	
	City	State	Zip			
h	Committee Name			ID#		
	Address					
	City	State	Zip			
5	ENTER TOTAL ONLY IF LAST PAGE	E OF SCHEDULE D-2 [if last page of Sc	chedule D-2, transfer tota	al to Detailed Summary Page, L	ine 12, Column A]	0.00

OFFSETS TO OPERATING EXPENSES*	SCHEDULE I	<b>D-3</b>
1. Committee Name Yes-for FUSD	2. ID#	
3. Report covering period from <u>January 1 2014</u> thru <u>May</u>	431,2014	
REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPE	INCEC	
NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED	DATE REFUND AMOUNT OF RECEIVED REFUND	THE
Name	NECESTED NET OND	
Street Address		
City State Zip		
Description of Refund		
Name		
Street Address		
City State Zip		
Description of Refund		
Description of Neturia		
Name		
Street Address		
City State Zip		
Description of Refund		
Name		
Street Address		
City State Zip		
Description of Refund		
Name		
Street Address	MM	İ
City State Zip	<del> </del>	-
Description of Refund		
Name		
Street Address		
City State Zip		
Description of Refund		

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 [if last page of Schedule D-3, transfer total to Detailed Summary Page, Line 17, Column A]

00,0

<sup>\*</sup> Includes return of contributions made by reporting committee

#### REPAYMENT OF CANDIDATE LOANS

**SCHEDULE D-4** 

	1. Committee Name Yes for FUSD	i			2. ID#	
	3. Report covering period from January	12014	_ thru _	May 31	2014	
4.	REPAYMENT OF LOANS MADE OR O				DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
а	Name Street Address					
	City State		Zip			
b	Name					<del>valenta anti anti anti anti anti anti anti a</del>
	Street Address					
	City State		Zip			
С	Name					
	Street Address					
,	City State		Zip			
d	Name Street Address				;	
	City State		Zip			
e	Name		Z.19			
•	Street Address					
	City State		Zip			
f	Name					
	Street Address					
	City State		Zip			
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [if last pa	ge of Schedule D-4, tran	nsfer total t	o Detailed Summary Page,	Line 13(a), Column A]	0.00

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			revised	12/2013

#### **REPAYMENT OF OTHER LOANS**

SCHEDULE D-5

1. Committee Name Yes for	FUSD		2. ID#
3. Report covering period from January	11 2014 thru	May 31, 20	14

4.	DEDA	YMENT OF ALL OTHE	ERLOANS		
	REFA	DATE REPAYMENT	AMOUNT OF THE		
	COMMITTEE) TO	DIVIDUAL (OR NAME, ID# A WHOM REPAYMENT (DISBU	ND ADDRESS OF THE POLITICAL JRSEMENT) WAS MADE	MADE	REPAYMENT
а	Name and ID Number				
	Street Address				
	City	State	Zip		
b	Name and ID Number				
	Street Address				
	City	State	Zip		
С	Name and ID Number	1-4			
	Street Address		***************************************		
	City	State	Zip		
d	Name and ID Number				
	Street Address				
	City	State	Zip		
9	Name and ID Number	And the second s			
	Street Address				
	City	State	Zip		
f	Name and ID Number				
	Street Address				
	City	State	Zip		
5	ENTER TOTAL ONLY IF LAST PAGE (	DF SCHEDULE D-5 [if last page of s	chedule Transfer total to Detailed Summary Page,	Line 13(b), Column A]	0.00

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## TRANSFERS TO OTHER POLITICAL COMMITTEES SCHEDULE D-6 2. ID#

1. Committee Name	YES TOY F	<u> </u>		_	
3. Report covering per	iod from <u>January</u>	1,2014	thru May 31, 7	2014	

		<u> </u>			,
4.	TRANSFERS	MADE BY THE REPOR	RTING COMMITTEE	DATE TRANSFER	AMOUNT OF THE
	NAME, ADDRESS AND I	D# TO WHOM TRANSFER (	(DISBURSEMENT) WAS MADE	WAS MADE	TRANSFER
а	Name and ID Number				
	Street Address	***************************************			
	City	State	Zip		
b	Name and ID Number				
	Street Address				
	City	State	Zip		
С	Name and ID Number				
	Street Address				
	City	State	Zip		
d	Name and ID Number				
	Street Address				
	City	State	Zip		
е	Name and ID Number				
	Street Address			<del></del>	
	City	State	Zip		
f	Name and ID Number				
	Street Address				
	City	State	Zip		
5	ENTER TOTAL ONLY IF LA	ST PAGE OF SCHEDULE D-6 IT	ransfer total to Detailed Summary Page, Li	ine 14. Column Al	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		·	.,		0.00

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	revised 12/2013

#### ANY OTHER DISBURSEMENT

State

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [if last page of Schedule D-7, transfer total to Detailed Summary Page, Line 15, Column A]

Street Address

Description

City

**SCHEDULE D-7** 

2. ID# 1. Committee Name DAGGORDON May 31, 2014 3. Report covering period from January 20) DATE ANY OTHER DISBURSEMENT AMOUNT OF THE DISBURSEMENT DISBURSEMENT NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION MADE Name and ID Number Street Address City State Zip Description Name and ID Number Street Address City State Zip Description Name and ID Number Street Address City State Zip Description Name and ID Number Street Address City State Zip Description Name and ID Number Street Address City State Description Name and ID Number

Zip

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0.00

#### IN-KIND CONTRIBUTIONS and EXPENDITURES SCHEDULE E 2. ID# 1. Committee Name 3. Report covering period from January 2014 thru IN-KIND CONTRIBUTIONS and EXPENDITURES FAIR MARKET DATE NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) VALUE FROM WHOM RECEIVED OR TO WHOM GIVEN a Name, Address, City, State, Zip, and ID# CONTRIBUTION EXPENDITURE Description Occupation Employer b Name, Address, City, State, Zip, and ID# CONTRIBUTION EXPENDITURE Description Occupation Employer Name, Address, City, State, Zip, and ID# CONTRIBUTION EXPENDITURE Description Occupation Employer d Name, Address, City, State, Zip, and ID# CONTRIBUTION EXPENDITURE Description Occupation Employer ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E [if last page of Schedule E, transfer total to Detailed Summary Page, Line 6, Column A] 000 6 ENTER TOTAL IN-KIND EXPENDITURES ONLY IF LAST PAGE OF SCHEDULE E [If last page of Schedule E, transfer total to Detailed Summary Page, Line 11, Column A]

Schedule	Ε	Page		of	_
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#### **DIVIDENDS, INTEREST, AND OTHER RECEIPTS SCHEDULE F-1** 2. ID# 1. Committee Name 3. Report covering period from January 1, 2014 DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS **AMOUNT** DATE OF THE NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) RECEIVED RECEIPT FROM WHOM THE RECEIPT WAS RECEIVED Name and ID Number Street Address State Zip Description of Receipt Name and ID Number Street Address City State Zip Description of Receipt Name and ID Number Street Address City State Zip Description of Receipt Name and ID Number Street Address State Zip Description of Receipt Name and ID Number Street Address

City

Street Address

Name and ID Number				
Street Address				
City	State	Zip		
Description of Receipt				
Name and ID Number				
Street Address				
City	State	Zip		
Description of Receipt				
ENTER TOTAL ONLY IF LAST PAGE	OF SCHEDULE F-11 [if last page of S	ichedule F-1, transfer total to Deta	ailed Summary Page, Line 7, Col	umn A] 0.00
			Schedule	F-1 Page of
				revised 12/2013

#### **OFFSETS TO CONTRIBUTIONS RECEIVED\***

SCHEDULE F-2

	1. Committee Name Vestor FUSD	2. 10#	
	3. Report covering period from January 1, 2014 thru May 31, 20	14	
4.	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED  NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) TO WHOM THE REFUND WAS MADE; DESCRIPTION	DATE REFUND WAS MADE	AMOUNT OF THE REFUND
a	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Refund		
b	Name and ID Number		
	Street Address		•
	City State Zip		
	Description of Refund	•	
C C	Name and ID Number	<u> </u>	
	Street Address		
	City State Zip		
	Description of Refund		
d	Name and ID Number		.,,,,,
	Street Address		
	City State Zip		
	Description of Refund		
9	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Refund		
F	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Refund		_
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 [if last page of Schedule F-2, transfer total to Detailed Summary Pag	e, Line 4(e), Column A]	0.00

<sup>\*</sup>Includes return of contributions received by reporting committee

## DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

	1. Committee Name Yes toy FUSD				
	3. Report covering period from January 1, 20	11 thru	Mark	banza 1	Jay31
4.	DEBTS AND OBLIGATIONS  NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
a	Name, Address, City, State, Zip, and ID#				
	Description of Debt				
b	Name, Address, City, State, Zip, and ID#				
	Description of Debt				
C	Name, Address, City, State, Zip, and ID#				
	Description of Debt				
d	Name, Address, City, State, Zip, and ID#				
	Description of Debt				
е	Name, Address, City, State, Zip, and ID#				
	Description of Debt				

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ENTER TOTAL OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD ONLY IF LAST PAGE OF SCHEDULE F-3 [If last page of Schedule F-3, transfer total to Detailed Summary Page, Line 19, Column A]